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**NOV 02 2006**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless directed below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7500 08/02/2006

Hendricks and Associates  
P.O. Box 2509  
Fairfax, VA 22031-2509

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

*Laura Scalise* (Depositor's name)  
*Laura Scalise* (Signature)  
*NOV. 2 2006* (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/713,113	11/17/2003	Kristen P. Bremner	1503C	9795

TITLE OF INVENTION: METHOD FOR DETECTION FOR TOTAL COLIFORMS AND E. COLI

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/02/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
JOIKE, MICHELE K	1636	435-03-1000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.36).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  
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2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

*11/03/2006 TDESHANE 62339292 051128 10713113*

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY AND STATE OR COUNTRY)  
The United States of America as represented by the Administrator of the U.S. Environmental Protection Agency

Washington, DC

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number *05-1128* (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(b)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Laura Scalise*Date *NOV 2, 2006*Typed or printed name *Laura Scalise*Registration No. *45,778*

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Date:	November 2, 2006		
To:	Mail Stop - ISSUE FEE	Phone:	
Office:	U.S. Patent Trademark Office	Fax:	571-273-2885
From:	Laura Scalise, Patent Attorney Reg. # 45,778	Phone:	202-564-8303
E-mail:	scalise.laura@cpa.gov	Fax:	202-564-5541
Number of pages (including transmittal sheet):	3		

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USSN 10/713,113

Filed: November 17, 2003

Inventors: Kristin P. Brenner, et. al.

Attorney Docket: 503C

Confirmation # 9795

Title of Invention - Method for Detection for Total Coliforms and *E. coli*

Examiner: Michele K. Jolka

Art Unit 1636

Class-subclass 435-034000

MESSAGE: Part B - Issue Fee Transmittal Form (form PTOL-85) for issue fee, publication fee plus 5 copies to be charged to deposit account number 05-1128. Extra copy of PTOL-85 for finance.